Application for Hospital Project Mortgage Insurance

U.S. Department of Housing and Urban Development Office of Hospital Facilities

OMB Approval No. 2502-0602 (Exp. 05/31/2015)

Section 242

Part I Mortgagor's Appl	ication							
Mortgagor's Legal Name:				Project Number:				
Section A.		Date Prepared:						
To:					and t	he Secretary	of Housing and U	rban Development.
The undersigned hereby applied	s for a l	oan in th	ne princii	pal amoui	nt of \$	J	to be	insured under the
provisions of Section	0	f the Nat	ional Hou	ising Act.	said loan to be secu	red by a firs	st mortgage on the r	roperty
hereinafter described. Insurance	of advan	ces durin	ıg constru	uction	is, is not desire	d.	Р	
B. Project Background informa					· <u> </u>			
1. Street Address:						2. Munici	pality	
3. County 4. State 5. Zip Cou			5. Zip Code:		6. No. of	7. Building Type:	8. Project Type	
o. County			6. Z.p 6666.			Licensed Beds:	Multistory	New/Repl
							One Story	Rehab
9. Non-Profit Gove	rnmontal	10 Cp/	ocify the Eunding, source:		•		_	
9. Non-Profit Governmental 10. Specify to For-Profit			ecily the Ful	the Funding Source: 11. Calendar Days in constr. contract				
C. Total Estimated Replacemen	nt Cost o	of Projec	t		Legal , Organization , Consultant, AMPO, & Special Assessments			sessments
Total Construction Cost P	er Contra	acts(s)	\$		22. Legal			
Fees					23. Organization			
2. Architect's Fee - Design	\$				24. Special Tax As	sessment		
3. Architect's Fee - Supervisory	-				25. Consultant			
4. Construction Mgmt. Fee					26. AMPO			
5. Other Fees (Identify)					27. Total Leg., Org.	Consult. AM	PO. & Spec. Asses.	
6. Total Fees (Lines 2-5)			\$		28. Total Soft Costs (lines 21 & 27)			
Other			Ι*		29. Total Estimated Project Cost (Lines 11 & 28)			
7. Contingency	\$							
	Ψ				30. Existing Land & PP&E to be included in Project 31. Land & PP&E to be purchased for Project			
8. Other (Identify)					32. Total Estimated Replacement Cost of Project			
9. Total Other (Lines 7-8)			\$		(lines 29,30, & 31)			
10. Equipment and Furnishings			\$		D. Estimated Cash Requirements – Sources and Uses			es
, , , , , , , , , , , , , , , , , , , ,			\$		Total Estimated Project Cost (from C.29)			
Carrying Charges and Financing	Г				2. Refinanced Capital Debt			
12. Interest: mos. @ %					3. Purchase Pric	e of Property	to be Acquired	
On \$	\$				4. Total Project	Uses (Lines	D1 through D3)	
13. Taxes					Other Funding	Req. (Identify	′)	
14. Insurance					Other Funding	Req. (Identify	')	
15. HUD Mtge. Ins. Prem.					7. Total Uses of	Funds (Lines	s D4 through D6)	
16. HUD Exam. Fee 0.3 %					8. Less Insured L	oan amount		
17. HUD Inspection Fee					9. Less Grant or	Approved Loa	ns (if any)	
18. Permanent Financing Fee%					Less Other FH	A Cash Requ	irements	
19. Initial Service Charge%					11. Cash Equity			
20. Title and Recording					12. Total Estimate	ed FHA Cash	Requirements	
21. Total Carrying Charges and F (Lines 12 through 20)	inancing		\$				Property (based o	
For HUD Use Only				to a ground lease		city to be mortgage	a nela parsuant	
Amount of Application Fee Received F. 1. SWAP termination cost incl. on line D(2)			•		No 🗌 Year	s		
						f so, Value?	? \$_	
Received by			2		2. Non-FHA cash requirements:			
					į			
(10/2001)								

F. Sponsors	Name of Sponsor or Co-Sponsor:	Telephone Number:							
	Address:								
	Name of Sponsor or Co-Sponsor:	Telephone Number:							
	Address:								
	2. Relationship between Sponsoring Group and Mortgagor (Existing Connections or Proposed, if Mortgagor has not been formed).								
provisions of that to the be which are pro It is herel listed herein	on The undersigned, as the principal sponsor(s) of the fithe regulations of the Secretary of Housing and Urbar est of his/her (their) knowledge and belief the mortgage erequisite to insurance of the mortgage under such Section represented by the undersigned that to the best of his/heare in any way false or incorrect and that they are truly of the best of his/heare in any way false or incorrect and that they are truly of the best of his/heare in any way false or incorrect and that they are truly of the best of his/heare in any way false or incorrect and that they are truly of the best of his/heare in any way false or incorrect and that they are truly of the best of his/heare in any way false or incorrect and that they are truly of the best of his/heare in any way false or incorrect and that they are truly of the best of his/heare in any way false or incorrect and that they are truly of the best of his/heare in any way false or incorrect and that they are truly of the best of his/heare in any way false or incorrect and that they are truly of the best of his/heare in any way false or incorrect and that they are truly of the best of his/heare in any way false or incorrect and that they are truly of the best of his/heare in any way false or incorrect and the best of his/heare in any way false or incorrect and the best of his/heare in any way false or incorrect and the best of his/heare in any way false or incorrect and the best of his/heare in any way false or incorrect and the best of his/heare in any way false or incorrect and the best of his/heare in any way false or incorrect and the best of his/heare in any way false or incorrect and the best of his/heare in any way false or incorrect and the best of his/heare in any way false or incorrect and the best of his/heare in any way false or incorrect and the best of his/heare in any way false or incorrect and the best of his/heare in any way false or incorrect and his/heare in any way false or incorrect and his/heare in any way false or incorrect and his/heare in any	n Development under the above identified sec or has complied, or will be able to comply, with ion. ner (their) knowledge and belief no information descriptive of the project or property which is i	tion of the National Housing Act and th all of the requirements thereof or data contained herein or attachment						
mortgage and Attest:	d that the proposed construction will not violate zoning	Ordinances or deed restrictions. Date:							
Signature: (Spon	sor)	Date:							
Part II - Mortg	agee's Application								
To: The Secretar	y of Housing and Urban Development:								
application is lapplication and	e provisions of the Section of the National Housing Act ic nereby made for the insurance of a mortgage covering pro d the proposed security, the undersigned proposed mortga unt of	operty described in the above application of the agee considers the project to be desirable and is	Mortgagor. After examination of the						
(\$over a period ofis is is no), which will bear interest at _ ofmonths and, according to an	percent amortization plan to be agreed upon. Insuran	($\%$), will require repayment of principace of advances during construction						
		your communicit, its own man action and the							
(\$) is subject to adjustment so that	at the total will not exceed	al will not exceedpercent (%)						
Discount or Pe	of your commitment. rmanent Financing Fee for the mortgage is%. eck for		Dollars						
), which is in payment of the	application fee required by said HUD Regulat							
Mortgagee:		Signature:							
Address:		Name & Title of Officer:							
	Certificate of Need Attached Original Certified by Each Sponsor and by the General Contractor	cate of Need Previously Furnished C	ertificate of Need Not Required						

Public reporting burden for this collection of information is estimated to average 4,664 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Applicants are required to complete this form to provide HUD with the necessary data to determine a hospital's eligibility for FHA insurance. HUD will use the information to determine that the applicant meets the requirements and eligibility criteria; underwriting standards; and adequacy of state/or local certifications, approval, or waivers. This collection of information is authorized by Section 242, Sections 223(a)(7), 223(e), 223(f), and 241(a) of 12 U.S.C. 1715z-7. This collection is required to obtain benefits.

Privacy Act Notice. The United States Department of Housing and Urban Development, Federal Housing Administration, is authorized to solicit the information requested in this form by virtue of Title 12, United States Code, Section 1701 et seq., and regulations promulgated thereunder at Title 12, Code of Federal Regulations. While no assurance of confidentiality is pledged to respondents, HUD generally discloses this data only in response to a Freedom of Information request. This agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless that collection displays a valid OMB control number.